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Title of Document: Death or Impending Death of Persons Receiving Services From DDSN

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Applicability: DDSN Regional Centers, DSN Boards, and Contracted Services Providers

I. Introduction

The purpose of this document is to establish procedures to be followed in the event of the impending death or death of an individual receiving services from a DDSN sponsored program.

Staff should always remain aware of the feelings and emotions of families whose loved one is critically ill or has just passed away. All contact with the family should be made in a sensitive and respectful manner. The physician should contact the family to answer questions and to assist them in understanding the individual's medical condition or cause of death. Staff who have worked closely with the critically ill or deceased individual and family are also important in assisting the family. However, the physician or the facility director/ executive director (if the physician is not available) should be the primary contact for the family if at all possible.

II. Impending Death

Should an individual's death become imminent due to accident or serious illness, and the person is residing in a DDSN sponsored residence, the physician should inform the parents/next-of-kin of the critical nature of the illness. The residence social worker or service coordinator along with the physician will maintain contact with the family during the period the person remains in

danger. If the family desires, a pastor or other religious person of their choice will be located to minister to the needs of the individual and the family.

III. Reporting the Death of an Individual Supported by DDSN

In order to provide quality assurance oversight, DDSN tracks relevant information on the deaths of all persons who reside in DDSN sponsored residential services, or whose death occurs at an Agency or provider location (e.g., day program) or while under the supervision of an Agency or provider staff person (e.g., individual rehabilitation supports)

A. DEATHS OF CONSUMERS AGE 17 AND UNDER IN DDSN OPERATED HOMES OR THOSE HOMES CONTRACTED FOR OPERATION BY DDSN

1. Facility Administrators/Executive Directors/CEOs or their designee will report the death to DDSN, Director of Quality Management as soon as possible, but no later than 24 hours using the Report of Death Form - Attachment A.
2. A written report using the Report of Death Form, must be made to DDSN, even if the child dies in a location other than his/her DDSN sponsored home (e.g., hospital).
3. If the death was unexpected or suspicious in nature, the Facility Administrator/Executive Director/CEO or their designee must call the District Director or their designee immediately. Immediately means within two (2) hours of the death. The District Director will then notify the Associate Director of Operations and the State Director. The Report of Death Form must still be sent to DDSN, Director of Quality Management as soon as possible but no later than 24 hours.
4. All deaths in ICF/MR facilities must be reported in writing by the Facility Administrator/ Executive Director/CEO or their designee to the Health Licensing Division of DHEC at the same time a report is made to DDSN.
5. The physician, Facility Administrator/ Executive Director/CEO or their designee shall notify the county coroner's office immediately of all deaths unless the death occurred in a hospital setting.
6. An internal review by management will be conducted of all deaths. However the review should never interfere with any outside investigation if applicable. Results of all reviews must be sent to the Director, Division of Quality Management and to DHEC, as applicable, within ten (10) working days of the death. The results of the review must be completed using Attachment B: Report of Death – Final Report. The Facility Administrator/Executive Director/CEO or their designee will review and sign the final report.

B. DEATHS OF CONSUMERS AGE 18 AND ABOVE IN DDSN OPERATED HOMES OR THOSE HOMES CONTRACTED FOR OPERATION BY DDSN

1. Facility Administrators/ Executive Directors/CEOs or their designee will report the death to SLED immediately using SLED's toll free number. In addition the Report of Death Form - Attachment A must be sent to DDSN, Director of Quality Management and to SLED as soon as possible, but no later than 24 hours.
2. A written report using the Report of Death Form must be made to DDSN and SLED even if the consumer dies in a location other than his/her DDSN sponsored home (e.g., hospital).
3. If the death was unexpected or suspicious in nature, the Facility Administrator/Executive Director/CEO or their designee must call the District Director or their designee immediately. Immediately means within two (2) hours of the death. The District Director will then notify the Associate Director of Operations and the State Director. The Report of Death Form must still be sent to DDSN, Director of Quality Management and SLED as soon as possible but no later than 24 hours.
4. All deaths in ICF/MR and CRCF facilities must be reported in writing by the Facility Administrator/ Executive Director/CEO or their designee to the Health Licensing Division of DHEC at the same time a report is made to DDSN.
5. The physician, Facility Administrator/ Executive Director/CEO or their designee shall notify the county coroner's office immediately of all deaths unless the death occurred in a hospital setting.
6. An internal review by management will be conducted of all deaths. However, the review should never interfere with the investigation of death conducted by the South Carolina Law Enforcement Division (SLED). Results of all reviews must be sent to the Director, Division of Quality Management and to DHEC and/or SLED, as applicable, within ten (10) working days of the death. The results of the review must be completed using Attachment B: Report of Death – Final Report. The Facility Administrator/Executive Director/CEO or their designee will review and sign the final report.

C. DEATHS OF PERSONS OF ANY AGE OTHER THAN THOSE LIVING IN A RESIDENTIAL PROGRAM OPERATED BY OR CONTRACTED FOR OPERATION BY DDSN WHILE AT AN AGENCY OR PROVIDER LOCATION (E.G. DAY PROGRAM) OR WHILE UNDER THE SUPERVISION OF AN AGENCY OR PROVIDER STAFF PERSON (E.G., INDIVIDUAL REHABILITATION SUPPORTS)

1. Facility Administrators/ Executive Directors/CEOs or their designee will report the death to DDSN, Director of Quality Management as soon as possible, but no later than 24 hours using the Report of Death Form – Attachment A.
2. If the death was unexpected or suspicious in nature, the Facility Administrator /Executive Director/CEO or their designee must call the District Director or their designee immediately. Immediately means within two (2) hours of the death. The District Director will then notify the Associate Director of Operations and the State Director. The Report of Death Form must still be sent to DDSN, Director of Quality Management as soon as possible but no later than 24 hours.
3. The physician, Facility Administrator/Executive Director/CEO or their designee shall notify the county coroner's office immediately of all deaths unless the death occurred in a hospital setting.
4. An internal review by management will be conducted of all deaths. However the review should never interfere with any outside investigation if applicable. Results of all reviews must be sent to the Director, Division of Quality Management within ten (10) working days of the death. The results of the review must be completed using Attachment B: Report of Death – Final Report. The Facility Administrator/Executive Director/CEO or their designee will review and sign the final report.

IV. Notification Procedures

For those consumers living in a DDSN sponsored residential setting, the family/guardian or primary correspondent will be notified of the death by the method they have identified in the consumer's plan such as by phone, personal visit or by notifying their minister who would then notify the family. If the family has made no prior arrangements, the attending physician will inform the family of the death of their family member as soon as possible after the death. Permission for an autopsy should be sought at that time as indicated by law. The social worker or service coordinator will also contact the family to help with funeral and burial arrangements. When gathering information on the death of a DDSN consumer, care must be taken to respect the feelings of survivors. The staff person should express condolences, indicate the importance of gathering key information for the benefit of other individuals with disabilities, and proceed to fill out the "Report of Death" form by retrieving information from all appropriate sources. If family members are unwilling/unable to participate in filling out the form, then the staff person should proceed with completing the form using information from other sources.

V. Autopsy

An autopsy will be performed following the death of an individual when requested by the coroner or SLED and should also be done when:

- a) death is an unexpected or unexplained outcome as determined by the attending physician and/or medical director, and/or facility administrator/ executive director/ CEO, or
- b) requested by the family.

If the circumstances of the death do not require an autopsy (i.e. ordered by the Coroner's Office or SLED), but one is sought, the attending physician will seek permission from the next of kin or correspondent. If permission is denied, this objection will be honored and the denial recorded in the chart by the requesting physician/medical director or facility administrator/executive director/CEO.

VI. Disposition of Remains

The remains of the deceased will be released to the parents or other responsible relative or guardian of record. If no responsible person is known or if such person refuses to accept custody of the remains, the Facility Administrator/Executive Director/CEO or their designee will arrange for burial or other appropriate disposition of the remains.

If possible, individuals should be buried in their home community. If no family member or relative can be located to help make arrangements for the burial in the home community, the facility administrator or executive director can arrange for the burial at an appropriate community or church cemetery. In these cases burials will be the financial responsibility of the regional center or provider agency responsible for the individual after all other resources have been utilized.

VII. Individual's Funds

At the time of death, all funds conserved for the individual are frozen, and no disbursements will be made without legal authority of the Probate Court. Should this pose a problem for families needing immediate access to the individual's funds for funeral expenses, the provider will cooperate with the family to assure the burial is handled in a reasonable manner in accordance with the family's wishes.

The Department of Disabilities and Special Needs will follow the procedures set forth in S.C. Code Ann. §62-5-105 (Supp. 2006) for reimbursement of full care and maintenance costs from any balance remaining in the deceased individual's estate six months after the death has occurred. Any further balance shall be paid to the estate of the decedent. (See 200-02-DD and 200-12-DD).

Once all final expenses, including burial expenses are handled, the final account balance of the funds remaining in the facility's regional bank is to be forwarded to the family/guardian with instructions to contact the Probate Court.

VIII. Quality Management

All Regional Centers, DSN Boards and Contracted Service Providers must follow the DDSN Quality Assurance Directive 100-28-DD to ensure continuous quality improvement in all services and supports provided to DDSN consumers. In addition, DDSN will participate in the Vulnerable Adult Fatalities Review Committee and the Children's Fatalities Review Committee to improve service quality and to develop and implement measures to prevent future deaths from similar causes from occurring if at all possible.

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(Approved)

Related Directives or Laws:

Child Protection Reform Act, Section 20-7-480, et seq.
Omnibus Adult Protection Act, Section 45-35-35
100-28-DD: Quality Assurance and Management
200-02-DD: Financial Management of Personal Funds
200-12-DD: Management of Funds for Individuals Participating in Community
Residential Programs

Attachments:

- A - Report of Death
- B - Report of Death (Final)